

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

005306, P043

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			24				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			24 minus 20=		* 4			X\$ 9=		OR	X\$18=	12
INDEPENDENT CLAIMS			4 minus 3 =		* 1			X42=		OR	X84=	84
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	896
CLAIMS AS AMENDED - PART II								•			OTHER	THAN
		(Column 1)	<i>y</i> v	(Colu		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		ı	+140=		OR	+280=	
	* •						L	TOTAL			TOTAL	
			ADDIT. FEE		Ort	ADDIT. FEE	à.					
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	1 г		ADDI-	ĺ	f	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER NOUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		1	+140=			+280=	
								TOTAL		OR	TOTAL	
	ADDIT. FEE									OR	ADDIT. FEE	
		(Column 1)		(Column 2) (Column 3						_		•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	200	X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPEND				IT CLAIM	1	J ∤			1		
*	If the entry in colu	ımn 1 is less than:	the entry in co	lumn 2 wri	te "O" in c	olumn 3		+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "Highest Nur	nber Previously Pa	aid For" (Total	or Indepen	dent) is th	e highest numb	er fou	ınd in the ap	propriate bo	x in co	olumn 1.	